

Fax Cover Sheet

Pharmaceuticals

To: Examiner Switzer Examiner, Art Unit 1634
Tel. 703-306-5824
Fax 703-872-9306

Copies:

From: Lyman H. Smith Tel. 973-235-3916
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Date: August 21, 2003

No. of pages: 11 (incl. cover sheet)

Please enter and forward the attached response to Examiner Switzer.

Enclosed, please find :

Amendment and Response (8 pages)
Certificate of Transmission under 37 CFR 1.8 (1 page)
Request for a one-month extension of time (1 page)


PTO/SB/97 (08-00)
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Certificate of Transmission under 37 CFR 1.8

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on August 21, 2003

Date



Signature

Lyman H. Smith

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Amendment and Response (8 pages)

Request for a one-month extension of time (1 page)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 20678															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">In re Application of <div style="text-align: right;">Kaul et al.</div></td> </tr> <tr> <td style="padding: 2px;">Application Number 09/864,954</td> <td style="padding: 2px;">Filed May 24, 2001</td> </tr> <tr> <td colspan="2" style="padding: 2px;">For A Nucleic Acid Which is Upregulated in Human Tumor Cells...</td> </tr> <tr> <td style="padding: 2px;">Group Art Unit 1634</td> <td style="padding: 2px;">Examiner Switzer</td> </tr> </table>			In re Application of <div style="text-align: right;">Kaul et al.</div>		Application Number 09/864,954	Filed May 24, 2001	For A Nucleic Acid Which is Upregulated in Human Tumor Cells...		Group Art Unit 1634	Examiner Switzer							
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>(\$110.00)</td> <td style="text-align: right;">\$ 110.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>(\$410.00)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>(\$930.00)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>(\$1450.00)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>(\$1970.00)</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-2525</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p> <p style="text-align: center;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;"> <p>August 21, 2003</p> <p>_____</p> <p>Date</p> </div> <div style="text-align: center;"> <p>_____</p> <p>Signature</p> <p>Lyman H. Smith</p> <p>_____</p> <p>Typed or printed name</p> </div> </div> <p style="font-size: small;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>			<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	(\$110.00)	\$ 110.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	(\$410.00)	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	(\$930.00)	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	(\$1450.00)	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	(\$1970.00)	\$ _____
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